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ABSTRACT

The field of early childhood special education (ECSE) is currently struggling with questions about relative effectiveness of different types of early intervention and how to provide children and their families with services that facilitate optimal development in inclusive settings. This chapter describes the history of ECSE and discusses recent changes in how special education services are delivered to young children with disabilities. The chapter highlights challenges for professionals in inclusive programs, compares and contrasts the views of curriculum in ECSE with that in early childhood education (ECE), and reviews the current state of ECSE curricular practices and how these practices can be used in ECE. The chapter provides information on federal legislation influencing ECSE services and discusses recent efforts to develop joint programs. The chapter also considers the need for interprofessional collaboration, collective values, parity, shared responsibility, and shared goals, maintaining that having shared goals has been particularly difficult for ECE and ECSE professionals to achieve, although there is increasing convergence toward a compatible instructional philosophy. The chapter discusses the Individualized Educational Plan (IEP) and examines curricular approaches that help children with disabilities achieve goals/objectives specified on their IEPs, while supporting their meaningful participation in activities with peers, focusing on naturalistic approaches to instruction. Finally, the chapter outlines curricular practices in inclusive settings, including: modifying curricula through environmental support, materials adaptation, activity simplification, adult and peer support, and special equipment. Other teaching strategies are embedding learning opportunities and using specialized instruction. (Contains 50 references.) (KB)

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CHAPTER 11

Curricular Considerations for Young Children in Inclusive Settings

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EARLY CHILDHOOD special education (ECSE) is a relatively new field. Thirty years ago, teachers, psychologists, speech pathologists, and other professionals were developing the first ECSE programs and attempting to answer the big question—Is early intervention for children with disabilities effective? That question has been answered with a resounding yes (see Guralnick [1997] for a thorough review of the early intervention efficacy literature), and now those in the field of ECSE are struggling with questions about the relative effectiveness of different types of early intervention services and how to provide children and their families with services that facilitate optimal development in inclusive settings.

The purpose of this chapter is to provide a brief history of ECSE; to describe the recent changes in how special education services are delivered to young children with disabilities; to highlight challenges for professionals in inclusive programs; to outline some of the similarities and differences in how curriculum is viewed in ECSE and early childhood education (ECE); and, finally, to review the current state of curricular practices in ECSE and describe how these practices can be used by professionals in ECE.

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A BRIEF HISTORY OF EARLY CHILDHOOD SPECIAL EDUCATION

Early childhood special education is linked historically with special education, early childhood education, and compensatory education (Peterson, 1987). Each of these fields made unique contributions to professional practice and societal attitudes that paved the way for the rapid growth of the field of ECSE. ECSE also has historical ties with disciplines outside of education. The work of professionals in the fields of nursing, developmental psychology, speech pathology, and rehabilitation has a direct influence on the educational services that young children with disabilities and their families currently receive.

ECSE services are also strongly influenced by, and to some extent defined by, legislation. Perhaps the most important piece of legislation for ECSE is PL 99-457, passed in 1986. This legislation, a reauthorization of PL 94-142, the Education of All Handicapped Children Act (now called the Individuals with Disabilities Education Act [IDEA]), mandated a free, appropriate public education for all 3- to 5-year-old children with disabilities and extended discretionary services for infants and toddlers with disabilities. As a result, education and related services for young children with disabilities have been provided by every state and territory in the United States since the 1990–1991 school year. Some of the primary components of IDEA that govern services for young children with disabilities include

- Zero reject
- Individualized and appropriate education
- Nondiscriminatory testing, classification, and placement
- Least restrictive environment
- Rights to procedural due process
- Shared decision making (Bailey & Wolery, 1992)

The least restrictive environment provision of the law has had the most influence on where special education services are provided for young children with disabilities. This provision stipulates that, whenever possible, early intervention services are to be provided in "natural environments, including the home, and community settings in which children without disabilities participate" (IDEA, 1991, Sec. 672).

EVOLUTION OF PRESCHOOL SERVICE DELIVERY

Prior to the passage of PL 99–457, if children with disabilities below the age of 5 were served at all, those services were primarily delivered in

segregated programs. Young children were taught by special education teachers, their assistants, and related services personnel.

During the recent past attempts were made to provide joint programs for children with and without disabilities. A number of programs were developed and funded through model demonstration monies provided by the U.S. Department of Education. Examples include the Community Integration Project (Bruder, 1993) and Project BLEND (Brown, Horne, Heiser, & Odom, 1996), in which toddlers and preschool children with disabilities are served in community early childhood programs. In addition, inclusive services are provided in some university-based child-care programs (Buyusse & Bailey, 1993) and in Head Start programs whose policies, since 1972, mandate that 10% of the children enrolled in each program have disabilities.

The landscape continues to change as more children with disabilities are served alongside their typically developing peers. In a nationwide survey of early education and child-care programs, Wolery and his colleagues (1993a, 1993b) found that children with disabilities were included in more than 70% of the responding programs. They reported that that number represented a doubling of children enrolled since 1986. In a less heartening finding, however, McDonnell, Brownell, and Wolery (1997) recently surveyed 276 preschool teachers working in programs accredited by the National Association for the Education of Young Children (NAEYC). In these high-quality programs, over 40% of the teachers reported that their programs did not include children with disabilities. Further, the majority of children who were included had speech/language problems or other mild disabilities. Fewer than one-third of the teachers had ever taught children with more severe disabilities.

Currently, services to young children with disabilities are provided in community-based child-care centers, Head Start programs, and public school programs (Odom et al., 1997). As shown in Table 11.1, within these settings, professionals offer individualized services to children in a variety of ways (Odom et al., 1997; Thompson, Wickham, Wegner, & Ault, 1996).

Each approach benefits from collaboration among ECSE and ECE staff; however, the team teaching and itinerant services: consultation approaches require extensive collaboration to be successful.

CHALLENGES FACING PROFESSIONALS IN INCLUSIVE PROGRAMS

The proliferation of inclusive programs presents challenges to the adults who teach in them. Training programs that prepare early education

Table 11.1. Approaches to the Provision of Special Education Services for Young Children with Disabilities in Inclusive Settings

Type of Approach	*Staff Members Who Provide Special Education Services*
Team Teaching	Special educator and early education teacher
Itinerant Services: Consultation	Early education teacher with consultation provided by special educator
Itinerant Services: Direct	Special educator and/or related services personnel
Integrated Activities Approach	Special educator
Reverse Mainstreaming	Special educator
Early Childhood Model	Early education teacher who has little contact with special educator
Inclusion Facilitator	Paraprofessional with consultation provided by special educator

teachers, in either general or special education, focus primarily on working with children. Although there is usually a secondary focus on families and paraprofessionals, few teacher preparation programs address how to collaborate effectively or how to share status and responsibility with other adults.

Nevertheless, to meet the needs of young children with disabilities, ECSE and ECE teachers must work together and collaborate. One factor that leads to effective collaboration is good communication (Donegan, Ostrosky, & Fowler, 1996; Lieber, Beckman, et al., 1997; Peck, Furman, & Helmstetter, 1993), which may be a particular issue in programs where adults are not together throughout the day, as they are in team-teaching classrooms. Strategies that facilitate communication include finding informal times to communicate (Lieber, Beckman, et al., 1997) as well as arranging formal meeting or planning times (Friend & Cook, 1996). Communication is also facilitated by stability in working relationships when staff turnover is limited (Donegan et al., 1996; Lieber, Beckman, et al., 1997).

Rainforth and England (1997) note that collaborative efforts are successful to the extent that collaborators hold collective values, including parity, shared responsibility, and shared goals. Parity may be difficult to achieve with the changing nature of roles in inclusive programs. Some staff members interviewed by Lieber, Beckman, and colleagues (1997) were unclear about what their roles were in team teaching and in itinerant models. Peck and colleagues (1993) reported similar concerns for related service providers who felt their roles had become obscure. Teachers interviewed by Thompson and her colleagues (1996) suggested

that a solution to the confusion was for staff members to be flexible and inventive.

Parity is strengthened among staff members when they share responsibility for children with and without disabilities. Lieber, Beckman, and colleagues (1997) found that shared ownership was more easily achieved in team-teaching programs. In contrast, in some itinerant models or in models using an inclusion facilitator, children with disabilities were seen as the responsibility of the special educator. That attitude was not inevitable, however. Thompson and colleagues (1996) found that a collaborative attitude was enhanced to the degree that the early childhood program staff felt "empowered as principal players on the team, valued rather than judged, and supported rather than intruded upon" (p. 46).

UNIQUE NEEDS OF YOUNG CHILDREN WITH DISABILITIES

The final challenge to collaboration that Rainforth and England (1997) identified—having shared goals—may be particularly difficult for ECE and ECSE professionals to achieve. Although the fields of ECSE and ECE share many goals, professionals in inclusive programs must be responsive to the unique needs of children with disabilities and the special concerns faced by their families.

One of the primary goals of ECSE is the amelioration of handicapping conditions and the prevention of secondary disabilities (Allen & Schwartz, 1996; Hanson & Lynch, 1995). This goal may require that families and early interventionists take a more directive approach than is used in most ECE programs. Another important goal of ECSE is to support the needs of families who have children with disabilities (Bailey & Wolery, 1992; Hanson & Lynch, 1995). This goal requires that practitioners work in partnership with families to identify their concerns, priorities, and needs as well as plan interventions that are effective in addressing them. This intervention plan must be specified and agreed to by the family and the service providers in the form of the Individualized Education Plan (IEP).

These differences, or perceived differences, in goals for ECE and ECSE programs are accentuated by different meanings attributed to the same words. Examples that we have experienced and others have written about include the terms *individualized, teaching or instruction,* and *child-directed* (e.g., Johnson & Johnson, 1992; Wolery & Bredekamp, 1994). On one occasion, when an ECSE teacher told an ECE teacher that a child had *individualized* goals that needed to be addressed in the context of ongoing activities in the classroom, the teacher responded, "But I don't have time

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to do any *one-to-one instruction* with him." Other ECE teachers told us that they see their role as presenting materials/activities to children and supporting their engagement, not *teaching or instructing*. In this view, teaching is linked to the terms *teacher-controlled* or *teacher-directed*. Yet many naturalistic approaches to instruction, described later in this chapter, emphasize the critical importance of capitalizing on child-initated activities, providing choices to children and following their lead, as part of the teaching or instructional process.

A second issue that may result in philosophical barriers is the meaning that we attribute to the use of terms by others. For example, the issue of *teacher-directed* versus *child-initiated* is often portrayed as a simple dichotomy. In this view, ECE teachers are viewed as erring on the side of withholding teacher involvement and possibly missing opportunties to challenge and support children's learning. On the other hand, ECSE teachers are seen as so quick to intervene that they intrude when less directive strategies, such as supporting play and peer interactions, may be effective.

In spite of these semantic challenges, there is an increasing convergence in ECE and ECSE toward a compatible philsophy of instruction. Both fields have been strongly influenced by social-constructivist theorists who believe that learning builds on a child's prior knowledge and experience, and occurs when children are full participants in learning activities. In addition, those theorists suggest that teachers provide the learning opportunities and mediate knowledge acquisition by bridging what a child knows with what the child needs to know at precisely the point when and where knowledge is created. Further, many current special education approaches are designed to fit into the routines and activities in early education settings. In the remainder of this chapter we review what we know about the convergence of ECE and ECSE curricular approaches in inclusive settings for young children.

OUR DEFINITION OF *CURRICULUM*

According to Wolery and Sainato (1993), curriculum has three elements: (1) the content that can be taught, (2) the methods used to determine what content to teach each child, and (3) the methods used to ensure that the identified content for each child is acquired and used. This definition represents the view of the Division for Early Childhood, the primary professional group in ECSE. It is very similar to the joint definition from the National Association for the Education of Young Children (NAEYC) and

the National Association of Early Childhood Specialists in State Departments of Education (NAECS/SDE), which states:

> A curriculum is an organized framework that delineates the content that children are to learn, the processes through which children achieve curricular goals, what teachers do to help children achieve these goals, and the context in which teaching and learning occur. (1991, p. 21)

Thus both definitions include the content, or what is to be taught and learned, and the methods, or how children are to acquire and use this content. We assume that, for the most part, the content (curricular goals) of early childhood is similar for children with and without disabilities. This shared curriculum includes such goals as becoming a more confident learner, learning to interact positively with peers, learning to respect others, learning to communicate effectively, acquiring and using problem-solving skills, enhancing gross motor skills, and so forth.

In addition to these shared curricular goals, children who receive special education also have personalized goals and objectives based on their unique needs. These appear on the child's IEP, a written document that must include the child's present levels of performance, annual goals and short-term instructional objectives, a statement of services needed, dates for initiation and expected duration of services, justification for the placement, and identification of individuals responsible for implementation. It is the responsibility of the team to ensure that services and interventions are implemented, and that information is collected to document progress toward achievement of the child's goals and objectives.

Unfortunately, the IEP is sometimes viewed as a separate curriculum for the child, one that may appear unrelated to the goals and objectives for all children in the classroom. Sometimes this view is reinforced by the way the IEP is developed and written (Goodman & Bond, 1993). That is, sometimes narrow, measurable, but insignificant objectives appear rather than objectives that are more functional, generalizable (i.e., able to be used in a variety of settings), and important. Objectives that meet the latter standards are more apt to be valued behaviors or skills in a child's natural environment.

Thus the IEP represents a child's unique needs and objectives and the methods and approaches that may be used to address those needs and objectives. It should not supplant the classroom curriculum or restrict the child's participation in classroom activities. The teacher's task is to build the curriculum around the needs, interests, experiences, and current knowledge of all children in the program as well as to address the unique needs of children with disabilities.

We now turn our attention to curricular approaches that help young children with disabilities achieve the goals and objectives specified on their IEPs, while at the same time supporting their meaningful participation in activities with their peers.

CURRICULAR APPROACHES IN EARLY CHILDHOOD SPECIAL EDUCATION

Our experience has shown us that including children with disabilities as full, participating members of a classroom community is not an easy process. Bricker (1995) suggests that children's involvement in programs can happen in one of two ways. The first is an "add-on" approach in which a child with disabilities is granted access into an inclusive classroom but is not functionally a member. In this approach, a child with disabilities might sit with the group during circle time, but few attempts are made to make the activity meaningful for the child. In the second approach, which Bricker labels "integrated," children with disabilities are involved and included in all activities to the extent they can participate.

Existing Early Childhood Curricula

One method for providing meaningful inclusion for young children with disabilities is to use a curriculum that ensures participation of all children. The Montessori, High/Scope, and Creative Curriculum are examples of curricula that promote inclusion for preschoolers with disabilities (Thompson et al., 1996). The authors identified attributes of those curricula that make them promising for use in inclusive programs, including encouraging child initiation and choice, establishing a predictable environment, and providing ample materials for use by children with a wide range of developmental levels.

An early study of the use of the High/Scope curriculum in integrated settings (Ipsa & Matz, 1978) showed that children with disabilities made gains in their cognitive development and that they interacted successfully with other children. There have been few additional studies, however, in which researchers have investigated outcomes for children with disabilities using these well-known ECE curricula.

Naturalistic Approaches to Instruction

As noted elsewhere in this chapter, including young children with disabilities as full, participating members of a classroom community presents

challenges to personnel and curriculum. In an attempt to address some of these challenges, as well as improve outcomes for children with special needs, researchers and practitioners in ECSE have embraced the use of naturalistic teaching approaches.

This approach to teaching attempts to "integrate the theories of Vygotsky, Piaget, and Dewey while using learning principles espoused by behavior analysts" (Bruder, 1997, p. 530). Known by names such as incidental teaching, milieu teaching, and activity-based instruction, naturalistic approaches share several characteristics:

1. Teaching occurs in the natural environment.
2. Individual teaching interactions are typically very brief and distributed or spaced over a period of hours or days.
3. Instructional interactions are typically child-initiated.
4. Instruction uses natural consequences (objects and events are highly salient and desired by the child) (Noonan & McCormick, 1993, pp. 238–239).

The popularity of naturalistic instruction has resulted in a drastic change in services for young children with disabilities. Whereas even 10 years ago, young children with disabilities were likely to be found sitting at desks, participating in individual or small-group teacher-led instruction, currently they spend more time in child-directed, teacher-supported activities, using materials that are typical of ECE programs and participating in activities with their peers.

Although naturalistic instruction is an excellent strategy for facilitating the successful inclusion of children with disabilities into early childhood education programs, it presents a number of challenges to researchers, practitioners, and consumers in ECSE. First, practitioners who received training in a more prescriptive approach to ECSE may understand effective instructional practices but be less prepared to plan interesting early childhood activities that are engaging and provide multiple opportunities to practice the target objectives. This can be especially challenging in classrooms that include children with a wide range of abilities, interests, play skills, and objectives that must be addressed.

Second, it is much more difficult to document the amount of instruction children are receiving and their concomitant progress using a naturalistic approach. Practitioners need to develop data collection systems that are accurate and sustainable, and use the data from these systems to inform team members about child progress and to make data-based decisions about intervention. Accountability is an essential component of ECSE (Carta, Schwartz, Atwater, & McConnell, 1991); however, tradi-

tional data collection systems may not be practical when using a naturalistic approach.

Finally, when using a naturalistic approach to intervention, simply providing access to the activity is not sufficient for many children with disabilities to learn their targeted objectives. Children with disabilities need support, scaffolding, and in some cases deliberate teaching to acquire and generalize new skills (Wolery, Strain, & Bailey, 1992). Researchers, practitioners, and consumers need to work together to define what specialized instruction looks like in the context of naturalistic approaches and how this type of instruction is best delivered. Guidance is needed about what skills are best suited to this approach and how additional support can be provided for children who are not making adequate progress with this type of intervention. Researchers have started to address this question and other issues of effectiveness. For example, one important consideration in adopting a curriculum that relies on naturalistic approaches is to determine if it indeed leads to children's skill acquisition, as Bricker (1995) suggested. A further consideration is practitioners' willingness to use naturalistic approaches. In the following section we review literature that addresses these issues.

Do Children with Disabilities Learn When Naturalistic Approaches Are Used? There is an extensive literature on the use of naturalistic approaches to promote skill acquisition in children with disabilities. Probably the earliest use of this approach, called "incidental teaching" by Hart and Risley (1968, 1975), was developed for use with children with delayed language production who came from families with low incomes. Incidental teaching was characterized by an unstructured activity, such as free-play or snack; an initiation or request (verbal or nonverbal) on the part of the child, which sets the occasion for language learning; and a response from an attentive adult. Hart and Risley found that children who participated in incidental teaching interchanges generally increased their production of the targeted language forms.

The incidental teaching approach was refined, extended, and experimentally validated in numerous studies by Kaiser, Warren, and their colleagues who developed milieu teaching procedures (Warren & Kaiser, 1988). Milieu teaching relies on following the child's interests and embedding the "teaching episode" into ongoing interactions between the teacher and the child (Kaiser, Yoder, & Keetz, 1992, p. 9). Evidence indicates that this approach results in improvement of children's use of language during conversation.

Other naturalistic approaches have been applied to objectives in areas other than language development. Venn and colleagues (1993) used

progressive time delay to teach children with autism to imitate their peers during art activities in an inclusive preschool. Using this technique, teachers gave a child with autism a direction to imitate one of his peers, then immediately assisted the child with the imitation. As the intervention proceeded and the target child was successful, the length of time between the teacher's direction and her assistance was lengthened. Using this approach, Venn and her colleagues were successful in teaching imitation to the three participants. Generalization to activities other than art was measured, but only when the teacher directed the children to imitate their peers; spontaneous imitation was not measured.

Grisham-Brown and Hemmeter (1997) used additional approaches to teach skill acquisition in typical classroom activities in integrated preschool programs. In addition to using time delay, they used other response-prompting procedures, such as the system of least prompts, simultaneous prompting, and most to least prompts (see Wolery & Wilbers [1994] for a description of these approaches). In their first study, four children with severe disabilities (i.e., multiple disabilities and deafness/blindness) were taught IEP objectives by classroom assistants during a variety of classroom routines and activities. In their second study, two children with developmental delays acquired their objectives during similar activities. Overall, five of the six children were successful in acquiring some of their objectives; there was some evidence that children maintained their performance over time; and the two children in the second study demonstrated two of their objectives in a novel setting.

Garfinkle and Schwartz (1997a, 1997b) conducted a series of studies to examine the effectiveness of embedding deliberate teaching into small-group activities in integrated preschool classrooms. The participants were children with autism and related disabilities whose objectives included imitation and use of an alternative communication system (picture exchange system [PECS]) with their peers. These skills were taught in the context of typical small-group activities (e.g., making books about a classroom theme, playing with modeling clay) in groups that included children with and without disabilities. In both studies children learned the targeted behavior during the small-group activity and demonstrated generalized use of the skill during a free-choice time later in the day. Additionally, the participants demonstrated increases in the quantity and quality of peer interaction during both the small-group activity and free-choice time.

Fox and Hanline (1993) incorporated additional naturalistic approaches into their intervention. In their first study, fine-motor and language objectives were taught to a child with Down syndrome who attended a university child-care center. The intervention occurred during

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free-choice time after the target child selected the area in which he wanted to play. The interventionist initiated a series of steps: first, modeling or commenting about a peer who was performing the targeted behavior; followed by asking, directing, and physically prompting the child to demonstrate the behavior. After 30 sessions, the child demonstrated each of the targeted behaviors and subsequently maintained them. Fox and Hanline extended this investigation with a second child who had developmental delays and also attended a child-care program. Results indicated that he acquired and maintained his objectives over time and that he generalized his objectives to a new activity.

Based on the limited evidence from the studies described above, we can have some confidence that children with disabilities can acquire new skills in the context of typical activities in inclusive preschool classrooms. However, there are characteristics of these studies that suggest further investigations are needed. For example, participants in Venn and colleagues' (1993) study were children with autism who attended a model program in which the ratio of children with disabilities to children without disabilities was higher than in typical child-care programs. Further, the staff-to-student ratio was higher than in many early childhood settings. Fox and Hanline (1993) conducted their studies in a child-care setting with larger group sizes; however, it was connected with a university, and the intervention was conducted by a practicum student. Thus, despite some evidence that children learn using naturalistic approaches, we are left asking what training and resources are required to make these interventions feasible and sustainable for teachers in typical early childhood programs.

Are Naturalistic Approaches Feasible and Sustainable? Mudd and Wolery (1987) provided an early response to this question when they successfully taught four Head Start teachers to use the incidental teaching strategy developed by Hart and Risley (1968). In a brief inservice workshop, teachers learned to use free-play as the setting to increase children's use of requests for particular toys. All four teachers were effective in implementing the components of incidental teaching. Two of the teachers required only the group-presented inservice; two teachers increased their use of the strategy when they received oral and written feedback as well. Although Mudd and Wolery demonstrated that Head Start teachers could acquire this effective teaching strategy, their study was not designed to measure whether the teachers used incidental teaching during additional classroom activities.

In another investigation, Venn and Wolery (1992) taught staff mem-

bers in an infant-care program that included children with disabilities to engage in interactions with the children during the caregiving routine of diapering. The training for these paraprofessionals was more intensive than the training offered to the Head Start teachers. Training was provided individually and included direct instruction, demonstration and practice, and coaching in specific behaviors. Staff members increased the number of interactive games (such as peek-a-boo) that they played with the children during diapering; however, they did not generalize this behavior to another routine—feeding.

In both investigations by Wolery and his colleagues, the researchers selected the teaching strategies used to improve the children's skills. Peck, Killen, and Baumgart (1989), however, used a different approach. They assumed that teachers would be more likely to implement an intervention if they were actively involved in designing the intervention and if it was compatible with the current classroom routine. In an inventive approach, Peck and colleagues videotaped three community child-care teachers interacting with three children with disabilities during selected routines and classroom activities. The researchers met later with the teachers and asked how they might incorporate the children's IEP objectives into the activities. The role of the researcher during the discussion was to facilitate idea generation, rank ideas, and provide positive feedback. Peck and colleagues found that this nondirective consultation increased the targeted teacher behavior, and two of the three teachers generalized their behavior to another activity.

In an attempt to make their intervention easier to implement and more likely to be carried out in typical early childhood programs, Peck and colleagues taught a special education staff member to provide the consultation and eliminated the videotaping. This refined intervention was successful as well. The two teachers increased their rate of providing IEP-targeted instruction to two children in an inclusive day-care facility; however, as Peck and colleagues note, the quality of the teachers' instruction was not measured.

Thus we are beginning to generate evidence that teachers can implement naturalistic approaches to instruction and that children can learn the targeted skills. In addition to the above approaches, which have been systematically studied in controlled investigations, both ECE and ECSE practitioners have developed a number of strategies that teachers and teams can use to modify or adapt activities, materials, and routines to facilitate the meaningful participation of children with disabilities in inclusive classrooms and to meet children's individual goals and objectives. Often the needed modifications are already in the teacher's repertoire,

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while other modifications are more specialized. In the following sections, we describe some of these modifications, beginning with those that are easier to implement.

CURRICULAR PRACTICES FOR INCLUSIVE EARLY CHILDHOOD EDUCATION

Curriculum Modifications

Wolery and his colleagues (1994) surveyed general early educators to obtain their perceptions of the ease with which activities and areas could be adapted to accommodate children with disabilities. Building on this study, Sandall, Chou, and Joseph (1997) conducted focus groups in five states with more than 100 participants, including teachers, therapists, and directors/supervisors. They asked questions related to the modifications used in early childhood settings that allow incorporation of children's IEP objectives into ongoing classroom activities and routines. These modifications are described below.

Environmental Support. Teachers can alter the physical space or offer particular materials that promote engagement and learning. Socially, teachers can ensure that the child has models, is in proximity to peers, and has access to consistent, responsive adults who join the child's play and help extend it. Modifications to the temporal environment include adjusting the length of activities or the sequence of activities, and carefully planning for transitions (such as altering the signal to change activities or using picture schedules).

Adaptation of Materials. Sometimes it is helpful or necessary to modify materials so that the child can participate as independently as possible. Examples include stabilizing materials (with tape, Velcro, or clamps), enlarging materials (with foam or commercial devices), and clarifying boundaries (with tape, trays, or cardboard box lids). The response itself can be modified or changed if the child's disability limits participation. For example, a nonverbal child might participate in singing by using gestures, pictures, or props; a child with physical disabilities might participate in a cutting activity by describing each of the steps to a peer buddy as they do the project together.

Simplification of Activities. Another strategy that is appropriate for some children is to simplify a complicated or complex activity or routine

by breaking it into smaller parts or by reducing the number of steps involved. The aim is not just to make the activity easier but rather to simplify the activity so that the child's attempts are effective enough to encourage continued participation. For example, in one classroom the usual routine for handwashing required using the soap dispenser on the wall of the bathroom. One child found this step too difficult and always stopped at this point. The complexity was modified by attaching a plastic soap dispenser to the counter with a suction cup, thereby eliminating the difficult steps of reaching across the sink and using an upward hand motion.

Use of Children's Preferences. If the child is not taking advantage of the available opportunities, a modification is to identify and use the child's preferences. For example, particular materials, activities, or individuals might entice the child to a learning center or activity. The expectation is that the child will then participate and learn.

Adult Support. There are a variety of ways that the adult can intervene to support the child's learning. Examples include providing a model, providing a prompt, giving specific feedback, and giving hand-over-hand assistance. Once again,, the aim is not simply to make the activity easier or to complete the activity for the child but to provide enough support so that the child's attempts are effective and the child continues to participate and learn.

Peer Support. Peers can be very effective in helping children learn important objectives. Children can be paired with a peer who can engage them in the learning activity or demonstrate how to participate. Peers can also be taught to model a specific behavior, provide prompts, and give positive feedback.

Special Equipment. Special or adaptive equipment or devices can allow children to participate or increase children's level of participation. For example, some children use adaptive chairs or standers. Such equipment means that the child does not have to expend energy sitting or standing and can use that energy to play. Some children use augmentative communication devices or systems such as sign language, picture symbols, or computers. Teachers need to learn and use the child's communication system and incorporate it in classroom activities and routines.

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Embedded Learning Opportunities

We have developed another teaching strategy that might be useful for teachers in inclusive classrooms. Drawn from activity-based intervention techniques developed by Bricker and Cripe (1992), it is based on the following premise: Although many ECE programs offer learning opportunities across the day, children with disabilities may need guidance and support in order to recognize and learn from those opportunities. Ideally, teachers identify the opportunities most salient to the individualized learning objectives for each child and embed short systematic instructional interactions into the existing routines and activities. In this manner, the child's IEP objectives can be addressed in the context of the classroom curriculum.

We have conducted several studies of the embedded learning opportunities (ELO) strategy and found that in all cases children made gains on their target behaviors when the teachers implemented the strategy. With support and guidance, all the teachers were able to identify learning opportunities, create additional opportunities, and establish systematic instructional interactions within ongoing routines and activities. We found, however, that the maintenance of and generalized use of the ELO strategy by the teachers seemed dependent on both the nature of the target objective and on how instruction was delivered in the classroom. For example, an IEP objective such as "pouring with minimal spillage" was easier to embed and support in a natural activity flow than increasing verbal responsiveness in a large-group choral responding activity. We also found that teachers' beliefs about their role in supporting children's learning needed to be addressed prior to implementation. The ELO strategy does require intervening with the child, potentially disrupting the child's current focus, and providing instruction matched to the child's current proficiency with the skill. For some teachers the intervention conflicted with their beliefs about teaching roles (Lieber, Capell, et al., 1998). Some prior discussions to resolve this conflict must occur to insure "buy-in" by the teachers and thus maintenance and generalized use.

Specialized Instruction

Modifying activities, routines, and materials and embedding planned learning opportunities are appropriate and sufficient to meet the needs of some young children with disabilities. Sometimes, however, more specialized instruction may be required. For example, some children with physical or sensory impairments may need to learn to use a wheelchair or Braille. Other children may not learn well from trial and error, and

others may not generalize without systematic instruction. Consequently, there are times when specialized, deliberate teaching is needed. These situations call for time and resources whether the child's learning setting is inclusive or segregated. This situation may also call for more systematic data collection to monitor the effectiveness and efficiency of the instruction.

WHERE DO WE GO FROM HERE?

As we review the research and state of the practice in ECSE curricula, one of the first questions that emerges is, What are the child outcomes we are trying to achieve? Although the process of education that occurs for most young children with disabilities has changed dramatically in the past 10 years, the way we talk about the outcomes of these changes has not. Our conceptualization of valued child outcomes has remained focused on discrete skills and domains, while our talk about intervention includes ideas about integrated curriculum, functional outcomes, and holistic child development. As a field we need to change the way we discuss child outcomes to be more congruent with current practices in ECSE classrooms. In many cases there is not a good match between the way we envision outcomes, write objectives, and deliver services, and the actual way in which the child uses these targeted skills to have an impact on his or her life. This lack of correspondence between goals and intervention is often most apparent in inclusive early childhood programs.

Some researchers have started to redefine outcomes so that a better fit exists between inclusive programs and what we know about child development. It is important to note, however, that in this attempt to more accurately define what is happening for children in inclusive classrooms, there is not an attempt to deemphasize the importance of skill building in traditional domains. Rather, there is an emphasis on acknowledging other skills that are also being acquired, as well as attempting to put the skills from traditional domains into the context of the social ecology of the classroom. For example, Billingsley, Gallucci, Peck, Schwartz, and Staub (1996) described an outcome framework for students involved in inclusive education. This framework was developed based on a sample of 35 children with moderate and severe disabilities who were involved in inclusive education. At the beginning of the study, the children ranged in age from 3 to 12 years old. The children were followed for 4 years; and extensive classroom observations, teacher interviews, and parent interviews were conducted for all participants. As a result, Billingsley and colleagues propose an outcome framework consisting of three interrelated

domains of outcomes: membership (i.e., interactions with groupss in the classroom, school, and outside of school), relationships (i.e., peeer relationships), and development (i.e., more traditional ECSE skills, ssuch as communication, motor skills, and self-care skills). These domaains are firmly embedded in the classroom community, and skills within the domains are acquired through participation in valued roles, routinnes, and activities in the classroom. To achieve skills in this type of outcomee framework, the child must participate in a meaningful way in the plannned activities and opportunities for specialized instruction in the early chiildhood program. Along with reconceptualizing child outcomes, a challeenge for the field of ECSE is how to facilitate, support, and maintain the meaaningful participation of children with disabilities in activities in inclusive EECE programs.

In this chapter we have provided an overview of the basic prrinciples that influence the development and implementation of curricula i in ECSE. Some early childhood educators may wonder how this chapter appplies to them or even why it was included in this volume. We suggest thaat information pertaining to planning and implementing effective educcational programs for young children with special needs is essential for all l people working with young children. Early childhood educators face a rnumber of challenges in their everyday practice. Foremost among thesse challenges is providing high-quality services for children who have : a wide range of risk factors, including poverty, prenatal exposure to alcobhol and other drugs, cultural/linguistic differences, as well as identified cdisabilities. The information presented in this chapter can be beneficial i in planning high-quality educational programs for all young children, rnot just those with identified disabilities.

In addition, it is important to note that in our current politiccal context, it is increasingly important for professionals in ECE to have knowledge and understanding about young children with disabilities. Innclusion of children with disabilities in community-based early childhoood programs is becoming more commonplace. Parents of children with cdisabilities have made clear that inclusion is here to stay, and the courrts have been clear that inclusion is a right, not a privilege (*Oberti* v. *Borrough of Clementon School District,* 1993). The challenge facing early childhoood educators, therefore, is how to make inclusion successful for all invcolved—the children, their families, and the professionals. In this chapter vwe provide some suggestions for developing strategies to support childrren and adults in inclusive early childhood programs. It is our hope thaat these strategies can be combined with existing practices in the field too create ECE programs that are truly appropriate for all children.

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